



Fact Sheet:



Facts and Figures On Methamphetamine

Background

- Methamphetamine is a strong central nervous system stimulant. The drug produces a state of increased energy, suppressed appetite, and elevated mood; effects may last as long as 10-12 hours vs. 45 minutes obtained from cocaine. The drug is easily produced, widely available, inexpensive to buy, and easy to use.
- Brain imaging studies show that methamphetamine use results in significant injury to the brain. During methamphetamine use, levels of key brain chemicals become depleted and the nerve cells that produce them are damaged – including the parts of the brain that control memory, judgment, impulse control, and mood states. Many of these effects are reversible; however not all effects are reversed on the same timetable, and recovery can take more than six months.
- Use can be devastating socially, physiologically, economically, and environmentally. Dependence occurs swiftly. Many use the drug in combination with alcohol and marijuana; like cocaine and heroin, it can be smoked, snorted, or injected.
- Chronic use is highly toxic; the body essentially burns itself up. Chronic use can lead to malnutrition,

paranoia, confusion, anxiety, sleeplessness, aggressiveness, heart failure, seizures, coma, and death.

- Methamphetamine can harm the developing fetus, increase an individual's risk of developing AIDS and other diseases (via needle sharing, rough sex, and lack of protection with condoms), cause serious driver impairment, and be dangerous when mixed with other licit or illicit drugs.
- Methamphetamine use frequently produces symptoms common to depression, anxiety, attention deficit hyperactivity disorder, and schizophrenia making assessment, diagnosis, and treatment challenging.

California Alcohol and Other Drug System (CADDs) Statistics

- CADDs collects client data from all publicly monitored treatment providers in California.
- Methamphetamine is now the most commonly reported primary drug in CADDs, surpassing alcohol and heroin.
- The CADDs data for State Fiscal Year SFY 01/02 through SFY 04/05

shows the percentage of clients admitted with a primary methamphetamine problem increased from 26.2 percent to 34 percent of all clients. Client counts with a primary methamphetamine problem increase from 46, 1998 in SFY 01-02 to 58,039 in SFY 04/05. Most of this increase in the percentage and number of clients seen for methamphetamine use is due to a large increase in the number of individuals referred from the criminal justice system, in particular those referred to treatment from the Substance Abuse Crime Prevention Act (SACPA) of 2000.

- The percent of unique clients under 21 years of age (youth) admitted with a primary methamphetamine problem increased from 15.8 percent of admissions in SFY 00/01 to 24.7 percent in SFY 04/05. Further, female youth clients admitted with a primary methamphetamine problem increased from 25.8 percent in SFY 00/01 to 35.7 percent in SFY 04/05
- The percent of Caucasian clients with a primary methamphetamine problem decreased steadily, from 61.4 percent in SFY 00/01 to 55.1 percent in SFY 04/05. Further, the percent of Hispanic clients with a primary methamphetamine problem increased steadily, from 26 percent in SFY 00/01 to 35.7 percent in SFY 04/05.

National Population Prevalence Estimate

- There are no reliable estimates of

the total numbers of Californians using methamphetamines. According to the U.S. Department of Health and Human Services' *Results from the 2004 National Survey on Drug Use and Health: National Findings (NDSUDH)*, almost 12 million people in the U.S. age 12 and older (4.9 percent) reported using methamphetamine at least once in their lifetime.

- Combining data from 2002 through 2004 NSDUH surveys, the U.S. Department of Health and Human Services reported more than two million Californians age 12 or older (7.3 percent) used methamphetamine at least once in their lifetime.

Emergency Room Mentions

- The Drug Abuse Warning Network (DAWN) collects drug mention data from a national sample of emergency rooms (ER). In California, DAWN reports on three standard metropolitan service areas (SMSAs). The most recent report shows that methamphetamine related ER visits per 100,000 population were up 71 percents in Los Angeles, up 43 percent in San Diego, and unchanged in San Francisco between 1995 and 2002.

Methamphetamine Lab Seizures

- Nationally, methamphetamine lab seizures steadily increased from 3,802 in 1998 to 9,895 in 2004. During that period, California's methamphetamine lab incidents decreased each year from 2,579 in 1999 to 767 in 2004.